

Application Number	10/619,542
Filing Date	July 16, 2003
First Named Inventor	Gerald BAYER, et al
Examiner Name	Not Yet Assigned
Art Unit	3661
Attorney Docket No.	023880-5

TOTAL AMOUNT OF PAYMENT	(\$) 1,330.00
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Examiner Name	Not Yet Assigned
Art Unit	3661
Attorney Docket No.	023880-5

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☐ Deposit Account
 Deposit Account Number: 19-2380
 Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s)
 ☒ Credit any overpayments

under 37 CFR 1.16 and 1.17

FEE CALCULATION

EXAMINATION FEES

Application Type	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
		Fee (\$)		Fee (\$)		Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	210	25
Multiple document claims	370	185

<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
198	- 20 or HP =	24	x	\$25	=	\$600	Fee (\$)
							Fee Paid (\$)

HP =- highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>
19	- 3 or HP =	6	x	\$105	=	\$630

HP =- highest number of independent claims paid for, if greater than 3

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number)	x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other:

SUBMITTED BY

Signature	/Tim L. Brackett, Jr., Reg. # 36,092/	Registration No. 36,092 (Attorney/Agent)	Telephone 202 585 8000
Name (Print/Type)	Tim L. Brackett, Jr.		Date March 6, 2008